

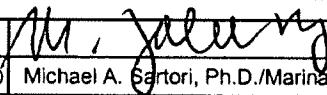


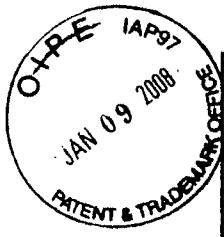
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEES TRANSMITTAL For FY 2007		Application Number	10/766,949-Conf. #2493
		Filing Date	January 30, 2004
		First Named Inventor	Alan J. Lipton
		Examiner Name	G. S. Philippe
		Art Unit	2613
TOTAL AMOUNT OF PAYMENT (\$ 2,250.00)		Attorney Docket No. 37112-192025	

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____					
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17			<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
2. EXCESS CLAIM FEES							
Fee Description							
Each claim over 20 (including Reissues) Fee (\$) Small Entity 50 25							
Each independent claim over 3 (including Reissues) Fee (\$) Small Entity 200 100							
Multiple dependent claims Fee (\$) Small Entity 360 180							
Total Claims Extra Claims Fee (\$) Fee Paid (\$) 45 - 60 = 5 x 50.00 = 250.00				Multiple Dependent Claims Fee (\$) Fee Paid (\$) _____ _____			
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) 16 - 6 = 10 x 200.00 = 2,000.00				Fee (\$) Fee Paid (\$) _____ _____			
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets		Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)
- 100 =		/50 =		(round up to a whole number) x		=	_____
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): _____							

SUBMITTED BY	
Signature	
Registration No. (Attorney/Agent)	41,289/53,825
Telephone	(202) 344-4004
Name (Print/Type)	Michael A. Sartori, Ph.D./Marina V. Zalevsky
Date	September 21, 2007



Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEES TRANSMITTAL		Application Number	10/766,949-Conf. #2493
For FY 2008		Filing Date	January 30, 2004
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		First Named Inventor	Alan J. Lipton
TOTAL AMOUNT OF PAYMENT (\$ 1,740.00)		Examiner Name	G. S. Philippe
		Art Unit	2613
		Attorney Docket No.	37112-192025

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION
1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES
Fee Description

	Fee (\$)	Small Entity
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
- =	x	=		Fee (\$) Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee Paid (\$)
- =	x	=			

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

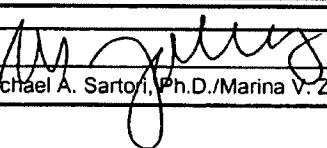
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Issue Fee & Publication Fee \$1,740.00

SUBMITTED BY					
Signature			Registration No. (Attorney/Agent)	41,289/53,825	Telephone (202) 344-4000
Name (Print/Type)	Michael A. Sartori, Ph.D./Marina V. Zalevsky		Date	January 9, 2008	